

#4/A
2-19-01
MLL.

PATENT



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of

SHAH et al.

Serial No. Unassigned 09964 268

Filed: September 25, 2001

Examiner: Unassigned

Art Unit: Unknown

Docket No. CISCPO64C1

October , 2001

For: SYSTEM AND METHOD FOR INFORMATION
RETRIEVAL REGARDING SERVICES

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, DC 20231 on October , 2001.

Signed: _____
Jennifer C. Gross

PRELIMINARY AMENDMENT A

Assistant Commissioner for Patents
Washington, DC 20231

Dear Sir:

Prior to the examination of the application on the merits, please ~~amend~~ the application as follows:

CANCELED CLAIMS

Please cancel ~~claims~~ 1-22.



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Application of:

SHAH et al. ✓

09 964 268

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INFORMATION RETRIEVAL
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Attorney Docket No.: CISCPO64C1 ✓

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Group Art Unit: Unknown

Date: October 4, 2001

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Commissioner for Patents, Washington, DC 20231 on October 4, 2001.

Signed: _____

Jennifer C. Gross

Assistant Commissioner for Patents
Washington, DC 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

Claims	Remaining After Amendment	Highest Previously Paid For	Present Extra	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE
TOTAL						
CLAIMS	15	22	0	X9 = \$	OR	X18 = \$
INDEP						
CLAIMS	4	4	0	X40 = \$	OR	X80 = \$
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$135		\$270
TOTAL				\$		\$ 0



Applicant(s) hereby petition for a _____ month(s) extension of time to respond to
the outstanding Office Action.

☐

Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0685.

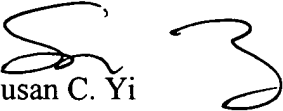
☐

Enclosed is our Check No. _____ in the amount of \$ _____ to cover the additional claim fee and/or extension of time fees.

☒

If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (CISCP064C1).

Respectfully submitted,
VAN PELT & YI LLP


Susan C. Yi

Registration No. 39,883 ✓

4906 El Camino Real
Suite 205
Los Altos, CA 94022
Telephone: (650) 903-3500